Image# 28934188230 10%39F2008 17:51

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1.	(a) Name of Individual, C	Organization or Corporation	, ,	•	I	
COMMON SENSE ISSUES INC						
	(b) Address (number and 8190-A BEECHMONT		iously reported			
	0190-A DELOI INIOITI	AVENUE 100				
	(c) City, State and ZIP C	ode			2. FEO. I	
	CINCINNATI	FEC Identification Number				
2.	Corporate filers only		C C90009739			
_	00.60.00.00.00.00.00.00.00.00.00.00.00.0	Is the filer a qualified nonprofit corpora	☐ No			
	Individual filers only	No C Familia			2ation	
	,	Name of Employer			Decupation	
	<u> </u>					
	4. TYPE OF RE	PORT (check appropriate boxes):				
	(a) \square April 1	15 Quarterly Report	X 24-Hour Notice	48-Hour N	Matica	
	(α) Δριιι ι	3 Quarterly neport	A 24-1 Iour Notice	∐ 40-110ui i	Notice	
	☐ July 1	5 Quarterly Report				
	☐ Octob	er Quarterly Report				
	Janua	ry 31 Year-End Report				
	(b) In this Par	port an amendment? Yes \square No $\overline{\mathbb{X}}$	1			
	(b) Is this Rep					
	5. COVERING F					
		THROU	GH			
	6. TOTAL CON	TRIBUTIONS			2500.00	
7. TOTAL INDEPENDENT EXPENDITURES					2500.00	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.						
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE						
Р	atrick Davis				10/31/2008	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.						
	NOTE: Submissi	on of false, erroneous or incomplete information	on may subject the person s	signing this report t	to the penalties of 2 U.S.C 437g.	

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A ITEMIZED RECEIPTS

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01	ny information copied from such Reports and for commercial purposes, other than using the	Statements may no	t be sold or used by s of any political cor	any person for the	ne purpose of soliciting contributions contributions from such committee			
	NAME OF FILER (In Full)							
	COMMON SENSE ISSUES INC							
	Full Name (Last, First, Middle Initial) Henry H.R. Coe				Date of Receipt			
	Mailing Address P.O. Box 1088				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	Zip Code		Transaction ID: F56.4111				
	Cody	WY	82414		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			500.00			
	Name of Employer			Occupation				
	Kasier and Co. Inc.			Manager				
	Full Name (Last, First, Middle Initial) David L. True				Date of Receipt			
	Mailing Address P.O. Drawer 2360				10 / 00 / 2008			
	City	State	Zip Code		Transaction ID: F56.4109			
	Casper	WY	82602		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			1000.00			
	Name of Employer			Occupation				
	True Drilling LLC			Managing N	Member			
).	Full Name (Last, First, Middle Initial) Henry True. III				Date of Receipt			
	Mailing Address P.O. Drawer 2360				1.0 / 0 0 / 1 2008			
	City	State	Zip Code		Transaction ID: F56.4107			
	Casper	WY	82602		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С			1000.00			
	·							
	Name of Employer			Occupation	Mb.			
	Eighty-Eight Oil LLC			Managing M	Member			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page carry total to Line 6)

2500.00

2500.00

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

COMMON SENSE ISSUES INC

PAGE 3	1	3
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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Full Name (Last, First, Middle Initial) of Payee Joseph David Advertising		Date						
Mailing Address 333 North Michigan Avenue		-	M M M / D D / Y Y Y Y A Amount					
City Chicago	State IL	Zip Code 60601			2500.00			
Purpose of Expenditure Radio Ad - Media Buy - Hometown Girl		Category/ Type		Office Hou	Sought:	X House Senate	State: WY District:	
Name of Federal Candidate Supported or Opposed Cynthia Lummis	by Expenditure:			Check One: X Support Oppose				
Calendar Year-To-Date Per Election for Office Sought		9000 00			isbursement For: 2008 Other (specify) Primary X General			
(a) SUBTOTAL of Itemized Independent Expenditure	es						2500.00	
(b) SUBTOTALof Unitemized Independent Expenditures								
(c) TOTAL Independent Expenditures(carry total from last page forward to Line			• • • •	2500.00				